


**BUREAU FOR PRIVATE POSTSECONDARY  
AND VOCATIONAL EDUCATION**

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**APPLICATION FOR SATELLITE NON-DEGREE INSTITUTIONS**

California Education Code, Section 94915, requires that "No private postsecondary educational institution may offer educational services or programs unless the institution or locations at which these services or programs are offered have been approved by the council as meeting the requirements of this section."

Official Use Only  
Satellite School Code

**NON-DEGREE INSTITUTIONS, CEC §94742**

"Satellite" means an auxiliary classroom or a teaching site. All the following apply:

- (a) Only educational services that are approved at the main location shall be offered at the satellite.
- (b) The institution shall maintain no permanent records of attendance or academic progress at the satellite.
- (c) Advertisement of a satellite shall indicate that the satellite is an auxiliary classroom or a teaching site.

**PLEASE INCLUDE: Lease Agreement, Fire Inspection Report, Occupancy Report, Business License, and Floor Plan drawn to scale (identify classrooms, laboratories, workshops, and libraries).**

**There is no application fee associated with establishing a satellite.**

**You may either complete this application or include the following information on your school letterhead:**

***A SATELLITE LOCATION MUST BE ASSOCIATED WITH A MAIN OR BRANCH LOCATION.  
IF ASSOCIATED WITH A BRANCH, PLEASE NOTE THE MAIN INSTITUTION'S ADDRESS.***

☐ Main School Code: \_\_\_\_\_ ☐ Branch School Code: \_\_\_\_\_

School Name: \_\_\_\_\_

**Main Institution's Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: CA Zip code: \_\_\_\_\_

**Branch Institution's Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: CA Zip code: \_\_\_\_\_

**Satellite Physical Location:** \_\_\_\_\_

City: \_\_\_\_\_ State: CA Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_ e-mail: \_\_\_\_\_

***Please list the courses that are offered at your satellite location. (Please list courses on a separate sheet if more room is necessary.)***

Program Title: \_\_\_\_\_ Hours/Length \_\_\_\_\_

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*"I declare under penalty of perjury that I have read the contents of this application and the Postsecondary Education Reform and regulations pertinent thereto, and that the information presented in this application is true and correct."*

Signature

Title

Date